PTOISB06 (08-03)

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U.S. Petent and Tademark Office; U.S. DEPARTNENT OF COMMERCE
to a collection of information unless & displays a valid OMR comme

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number		
CLAIMS AS FILED - PART I OTHER THAN												
			(Cotumn 1)		(Cottens 2)		SMALL ENTITY		CHR	SMALL ENTITY		
FOR BASIC FEE		MANUBE	MANUSER FILED		NUMBER EXTRA		re	PEE		RATE	FEE	
(D7 CF	R 1.16(a))					<u> </u>	_	<u> </u>	OR		<u> </u>	
TOTAL CLAIMS GT CFR 1.18(d)			minus 20 +		•		_• ·		CR	ו•		
DEPENDENT CLAIMS OF CFR 1.18(N)		\$	minus 3 =		•		_•		OR	, <u>.</u> .		
MILITIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(V))								OR.	+5=			
" If the difference in column 1 is less than zero, enter "V" in column 2.						TO	AL		OR	TOTAL		
CLAIMS AS AMENDED - PART II												
10												
10	205	(Cotumn 1)		(Column 2)	(Column 3)	SI	IALL I	ENTITY		SMALL	ENTTTY	
MTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PARD FOR	PRESENT EXTRA	RA	TE .	ADDI- TICHAL FEE		RATE	ADDI- TIONAL FEE	
뿧	Total or cra 1.18(s)	. 32	Minus	- 53	•	X S	_•		OR	x :		
AMENDMENT	independent OF OFA 1.1400)	-6	Minus	- 9	•	× e_			OR	x 4		
FRIST PRESENTATION OF MULTIPLE DEPARTMENT CLARK (37 CFR 1.18(4))					1.			OR	+1			
						TOTAL			OR	TOTAL ADD'L FEE		
						,,,,,	_		•			
┝┯		(Cotumn 1)		(Column 2) HIGHEST	(Column 3)			1	1			
ا ا ا	1-1006	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OMENT	Total co cra i.seco	.29	Minus	53	• ~	× s_			OR.	× 4		
	independent (SI CFR 1,1808)	. 3	Minus	- 9	•	X 8_			OR	× 1 •		
REST PRESENTATION OF MULTIPLE DEPONDENT CLAIM (37 CFR 1.19(d))						+5			OR	••		
						TOTA	FEE		OR.	TOTAL ADD'L FEE		
1-31-57 (Column 1) (Column 2) (Column 3)												
		CLAIMS		HIGHEST NUMBER	PRESENT	84	TE	ADDI-	1	RATE	ADDI-	
S		REMAINING AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	~		TIONAL	1		TIDNAL	
ENDMENT	Total oz cen u inco	29	Minus	53	·æ	××	•		ОЯ	x 4	(
	independent process Lisep	.3	Minus	- 9	6	X S			OR	X 8 e		
₹	FIRST PRESENTATION OF MARTIPLE DEPENDENT CLAIM (27 CFR 1.18(4))					+8_	•] or	+ 1 -		
						TOTA			QR	TOTAL ADO'L FEE		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".												
The Nighest Number Previously Pald For (Total or Independent) is the highest number found in the appropriate box in column 1.												

This colection of information is required by 37 CFR 1.18. The Information is use required to obtain or retain a benefit by the public which is to file (and by the USPTO) by moreous) as application. Confiderdiadly is governed by 35 U.S.C. 122 and 37 CFR 1.14. This orderdon is estimated to take 12 minutes to complete, including gathering, preparing, and cubmiting the completed application form to the USPTO. This will vary depending upon the individual case. Any commence on the amount of time you require to complete this form and/or suggestions for reducing this burden, stroub be sent to the Chief information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Abstandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Abstandria, VA 22313-1450.